


2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2004 08:00 AM
Secretary of State

DOCUMENT # F0200006246

1. Entity Name
M & J INVESTMENTS OF MINNESOTA, INC.



Principal Place of Business Mailing Address

**4978 MILLER TRUNK HWY.
DULUTH MN 55811** **4978 MILLER TRUNK HWY.
DULUTH MN 55811**

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent

**HAYMAN, RICHARD L
19415 SILVER OAK DRIVE
FORT MYERS FL 33912**

4. FEI Number Applied For

39-1713238 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE	CST <input type="checkbox"/> Delete
NAME	GOLDBERG, DAVID ALLEN
STREET ADDRESS	4978 MILLER TRUNK HWY.
CITY - ST - ZIP	DULUTH MN 55811
TITLE	VCVP <input type="checkbox"/> Delete
NAME	GOLDBERG, CHERYL B
STREET ADDRESS	4978 MILLER TRUNK HWY.
CITY - ST - ZIP	DULUTH MN 55811
TITLE	D <input type="checkbox"/> Delete
NAME	GOLDBERG, DAVID DEAN
STREET ADDRESS	4711 BAYCLIFFE DRIVE
CITY - ST - ZIP	EXXCELSIOR MN 55331
TITLE	D <input type="checkbox"/> Delete
NAME	OGREN, MARK JOSEPH
STREET ADDRESS	6076 SCENIC ROAD
CITY - ST - ZIP	MINNETONKA MN 55345
TITLE	D <input type="checkbox"/> Delete
NAME	GOLDBERG, DARRELL GENE
STREET ADDRESS	4978 MILLER TRUNK HWY.
CITY - ST - ZIP	DULUTH MN 55811
TITLE	D <input type="checkbox"/> Delete
NAME	OGREN, LORI LYNN
STREET ADDRESS	3400 AVE. OF THE ARTS #G214
CITY - ST - ZIP	COSTA MESA CA 92626

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000082132
03/09/04-80017-011 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David A. Goldberg **DAVID A. GOLDBERG** 3/5/04 218 729-9445

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #